Case 16-15452 Doc 1	Filed 05/05/16	Entered 05/05/16 17:16:43	Desc Main
Fill in this information to identify your case:		age 1 of 72	
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)	<u> </u>		
Case number (if known)	Chapter you are filing under:		
	Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Christobal First name	First name
Write the name that is on your government-issued picture identification (for example, your driver's license or passport	Middle name Enriquez Last name	Middle name Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX5242	xxx - xx-
Security number or	OR	OR
federal Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

Christo@ase 16-15452 Doc 1 Filed 05#05/426 Entered 05/05/16 (147:416:43 Desc Main Debtor 1 Page 2 of 72 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 515 Elmwood Ave Number Street Number Street 60433 Joliet Illinois City State Zip Code City State Zip Code Will County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District ____ When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Christo@ase 16-15452 Doc 1 Filed 05#05/426 Entered 05/05/16 (147:416:43 Desc Main Debtor 1 Page 4 of 72 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building

that needs urgent

repairs?

State

City

Zip Code

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Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

About Debtor 1:

completion.

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one: You must check one: I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. that you developed with the agency. I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of

you MUST file a copy of the certificate and payment plan, if any.

Within 14 days after you file this bankruptcy petition,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

I have a mental illness or a mental Incapacity.

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this

About Debtor 2 (Spouse Only in a Joint Case):

bankruptcy petition, and I received a certificate of

Attach a copy of the certificate and the payment plan, if any,

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Christo@ase 16-15452 Doc 1 Filed 05**#**0**5/4/6** Entered 05/05/16 (147:416:43 Desc Main Debtor 1 Page 6 of 72 Document Document **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ٦ Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Christobal Enriquez Signature of Debtor 2 Signature of Debtor 1 Executed on 5/5/2016 Executed on MM / DD / YYYY MM / DD / YYYY

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Brent Ingram		Date	5/5/2016	
Signature of Attorney for Debtor			MM / DD / YYYY	,
Brent Ingram				
Printed name				
Semrad Law Firm				
Firm name				
2424 Plainfield Road				
Street				
Suite 300				
Crest Hill	Illinois		6	0403
City	State		Z	lip Code
Contact phone		E	mail address	
Bar number			tate	

Doc 1 Filed 05/05/16 Entered 05/05/16 17:16:43 Desc Main Fill in this information to identify your case: Debtor 1 Christobal Enriquez First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$10,723.00 1b. Copy line 62, Total personal property, from Schedule A/B \$10,723.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$15,669.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$30.555.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$46,224.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$2,193,53 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$2,165.00

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Pa	t 4: Answer These Questions for Administrative and Statistical Records							
6.	6. Are you filing for bankruptcy under Chapters 7, 11, or 13?							
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.							
	Yes.							
7. '	What kind of debt do you have?							
	Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primfamily, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C.							
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. C this form to the court with your other schedules.	heck this box and submit						
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from C Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	Official	\$2,348.23					
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:							
	From Part 4 on Schedule E/F, copy the following:	Total claim						
	9a. Domestic support obligations (Copy line 6a.)	\$0.00						
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00						
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00						
	9d. Student loans. (Copy line 6f.)	\$0.00						
	9e. Obligations arising out of a separation agreement or divorce that you did not report as	\$0.00						
	priority claims. (Copy line 6g.)							
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00						
	9g. Total. Add lines 9a through 9f.	\$0.00						

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Fill in this	information to identify your case:					
Debtor 1	Christobal		Enriq	uez		
	First Name	Middle	Name Last N	lame		
Debtor 2 (Spouse, i	f filing) First Name	Middle	Name Last N	Name		
United Sta	ates Bankruptcy Court for the:	Northern	District of I			
Case num (If known)	ber		(State)		
Officia	al Form 106A/B					Check if this is an amended filing
Sched	dule A/B: Prope	rty				12/1
esponsib vrite your Part 1:	where you think it fits best. Be le for supplying correct inform name and case number (if kno Describe Each Residence I own or have any legal or equ	mation. If more s own). Answer eve ce, Building, I	pace is needed, attach ery question. Land, or Other Rea	a separate sheet to this form	n. On the top of a	ny additional pages,
\checkmark	No. Go to Part 2					
	Yes. Where is the property?					
1.1	Street address, if available, or o	other description	What is the property Single-family home	e	the amount of an	ecured claims or exemptions. Put y secured claims on Schedule D: Have Claims Secured by Property.
	offect address, if available, of c	outer accompliant	Duplex or multi-un	•	Current value	· · ·
			Condominium or co	•	entire property	
			Land	obile nome		-
	Number Street		Investment property	V		ature of your ownership
			Timeshare	'	interest (such a	s fee simple, tenancy by or a life estate), if known.
	City State	Zip Code	Other			
			Debtor 1 only Debtor 2 only Debtor 1 and Debtor	in the property? Check one. or 2 only debtors and another	Check if thi	is is community property ctions)
				ou wish to add about this iten	n, such as local	
lf vou c	own or have more than one, list he	ere.	property identification	n number:		
1.2			What is the property Single-family home	• • •	the amount of an	ecured claims or exemptions. Put y secured claims on <i>Schedule D:</i>
	Street address, if available, or c	ther description	Duplex or multi-un Condominium or co	•	Current value	
			Manufactured or m	obile home	entire property	
	Number Street		Investment property	/	Describe the na interest (such a	ature of your ownership is fee simple, tenancy by
	City State	Zip Code	Timeshare Other			or a life estate), if known.
		_,, 5550	Debtor 1 only Debtor 2 only Debtor 1 and Debt	in the property? Check one. or 2 only debtors and another	Check if thi	is is community property ctions)

Other information you wish to add about this item, such as local property identification number:

Debtor 1 Christo Gase 16-15452 Do	oc 1 Filed 05/05/16 Entered 05/05/16	6 മി.7ംപി 6: <u>43 Desc Main</u>
1.3Street address, if available, or other descripti	What is the property? Check all that apply. Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
Number Street City State Zip Code	Land Investment property Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, property identification number:	Check if this is community property (see instructions)
	rn for all of your entries from Part 1, including any entries ber here	. •
Do you own, lease, or have legal or equitable in	terest in any vehicles, whether they are registered or not? nicle, also report it on Schedule G: Executory Contracts and Une: motorcycles	
3.1 Make Hyundai Model: Elantra Year: 2014	Who has an interest in the property? Check one. ✓ Debtor 1 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
Approximate mileage: 69000 Other information:	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Current value of the entire property? portion you own? \$9173.00
3.2 Make Model: Year: Approximate mileage:	instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.
Other information:	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Current value of the entire property?

Debtor 1	Christo Gase 16-15452 Doc 1	Filed 05#05/426 Entered 05/05/14	6 (14:76:43 Des	c Main	
	First Name Middle Name	Document Page 12 of 72			
3.3	Make	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> :		
	Model: Year:	Debtor 1 only	•	ims Secured by Property.	
	Approximate mileage:		Orcators vino riave ora	iins occured by 1 roperty.	
	··· <u> </u>	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
3.4	Make	Who has an interest in the property? Check	Do not deduct secured cl	•	
	Model:	one.	the amount of any secure		
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
	Yes				
4.1	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
	Model:	one.	the amount of any secured claims on Schedule D:		
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
4.2	Make	Who has an interest in the property? Check	Do not deduct secured cl	aims or exemptions. Put	
	Model:	one.	the amount of any secure		
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.	
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the	
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see instructions)			
		II of your entries from Part 2, including any entries t	1 09	173.00	
you nu		~ ······			

Debtor 1 Christo Gase 16-15452 First Name Doc 1 Filed 05±05/426 Entered 05/05/16/147:416:43 Desc Main Documenter Page 13 of 72

Describe Your Personal and Household Items

Do you own or	have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goo	ds and furnishings	
Examples: Major a	ppliances, furniture, linens, china, kitchenware	
☐ No		
Yes. Describe	Used	\$700.00
—	ons and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
No		
✓ Yes. Describe	Used	\$200.00
8. Collectibles of v	ralua	
Examples: Antique stamp,	es and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; coin, or baseball card collections; other collections, memorabilia, collectibles	
No		
Yes. Describe		
Examples: Sports,	photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes aks; carpentry tools; musical instruments	_
✓ No		
Yes. Describe		
10. Firearms Examples: Pistols, ✓ No ✓ Yes. Describe	rifles, shotguns, ammunition, and related equipment	- 1
11. Clothes Examples: Everyda	ay clothes, furs, leather coats, designer wear, shoes, accessories	
Yes. Describe	Used	\$650.00
		\$650.00
12. Jewelry Examples: Everyda gold, si	ny jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, lver	
✓ No		
Yes. Describe		
13. Non-farm anim Examples: Dogs, o		
Yes. Describe		
Tes. Describe		
14. Any other pers	conal and household items you did not already list, including any health aids you did not list	
Yes. Describe		
Too. Describe		
	value of all of your entries from Part 3, including any entries for pages you have attached at number here	\$1550.00

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Part 4: Describe Your Financial Assets

Current value of the portion you own?

Do not deduct secured claims or exemptions.

Do	you own or have a	ny legal or equitable inter	rest in any of the following] ?	portion you own? Do not deduct secured claims or exemptions.
16.	Cash				
E	Examples: Money you have	in your wallet, in your home, in a sa	ife deposit box, and on hand when yo	ou file your petition	
	✓ No				
	Yes			Cash:	
17.			certificates of deposit; shares in credents with the same institution, list eac		
	☐ No				
	✓ Yes		Institution name:		
		17.1. Checking account:	Chase		
		17.2. Checking account:			
		17.3. Savings account:			
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.	Examples: Bond funds, in	or publicly traded stocks vestment accounts with brokerage f	firms, money market accounts		
	✓ No ☐ Yes	Institution or issuer name:			
					-
19.	an LLC, partnership, a		ed and unincorporated business	es, including an interest in	
	Yes. Give specific information about them	Name of entity		% of ownership:	
	u ICI I I				

Doc 1 Filed 05#05/426 Entered 05/05/116 /43/146:43 Desc Main Document Page 15 of 72 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. Yes. Give specific information about Issuer name: them.... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans **✓** No Type of account: Institution name: Yes. List each account separately. 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others **✓** No Institution name: Yes.... Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) **✓** No Issuer name and description: Yes....

Debt	or 1	Christo Cal	<u>se 1</u>	6-15452	Doc 1		<u>05⊭05/426</u> cumente			6 (ilknowl) 6: <u>43</u>	Des	sc Main
24.				ition IRA, in a , 529A(b), and		a qualifie	d ABLE progra	m, or unde	r a qualified sta	te tuition program.		
		No Yes	Institutio	on name and d	escription. Sep	arately file	the records of a	ny interests	11 U.S.C. § 521((c):		
25.		rcisable fo	r your l		ts in property	(other th	an anything lis	ted in line), and rights or	powers		
26.	L.J.	Yes. Desc		trademarks, ti	rade secrets.	and other	· intellectual pro	pperty				
20.	Еха		net dom				yalties and licens		ents			
27.	Еха	<i>mples:</i> Build			eneral intangite e licenses, coo		ssociation holdin	gs, liquor lid	enses, professio	nal licenses		
		No Yes. Desc	ribe									
Mor	ey (or prope	rty ov	ved to you?	?						po Do	ortion you own? not deduct secured ims or exemptions.
28.	Тах	refunds ov	ved to y	ou								·
	✓									1 –		
		Yes. Give s about		nformation ncluding whethe	er					Federal:	•	
		you al	ready fil	ed the returns						State:		
29.	Fam	ily suppor	•	G. G						Local:	•	
				ump sum alimo	ny, spousal sur	port, child	support, mainte	nance, divo	ce settlement, pr	operty settlement		
	✓	No								Alimony:		
	Ш	Yes. Give s	pecific ii	nformation						Maintenance:	•	
										Support:	•	
										Divorce settlement		
										Property settlemen	•	
30.	Othe	er amounts	some	one owes you						Froperty settlemen		
		<i>nples:</i> Unpa	id wage	es, disability ins			-	pay, vacatio	n pay, workers' co	mpensation,		
		No Soci	ai Octul	ny bondina, uni	Jaia idalis you	11446 10 5	STREET IC GISC					
	_	Yes. Descri	be									

Debt	or 1	Christo Sase 16 First Name	6-15452	Doc 1 Middle Name	Filed 05#05/126 Document	Entered 05/05/0 Page 17 of 72	16 (147-146: <u>43</u> D	esc Main
31.		rests in insurance mples: Health, disabi		rance; health		redit, homeowner's, or rente	r's insurance	
		No Yes. Name the insura of each policy and lis	. ,		Company name:		Beneficiary:	Surrender or refund value:
32.	If you		of a living trust		meone who has died ceeds from a life insurance	policy, or are currently entitle	ed to receive	
33.	Exar ✓				I have filed a lawsuit or more claims, or rights to sue	ade a demand for payme	nt	
34.	Othe to se		unliquidated	claims of ev	very nature, including co	unterclaims of the debtor	and rights	
35.	✓	financial assets yo No Yes. Describe	u did not alre	ady list]
36.			-			ies for pages you have att		
Part	5:	Describe Any B	Business-Ro	elated Pro	pperty You Own or H	ave an Interest In. Li:	st any real estate i	n Part 1.
37.	Do y	ou own or have an	ıy legal or equ	uitable intere	est in any business-relate	ed property?		
		No. Go to Part 6. Yes. Go to line 38.						Current value of the portion you own? Do not deduct secured claims or exemptions
38.	✓	ounts receivable or No Yes. Describe	commissions	s you alread	y earned			1
39.	Exar				odems, printers, copiers, fa	ıx machines, rugs, telephone	es, desks, chairs, electron	ic devices
		No Yes. Describe						

Deb	tor 1 ChristobaldSE IC	0-15452 DUCI FIIEU USBUTGIAZO EIILEI EU USBUTGIA GURAN (ALA DE	esc main
40.	First Name Machinery, fixtures, equ	Middle Name Docume Page 18 of 72 uipment, supplies you use in business, and tools of your trade	
	✓ No		
	Yes. Describe		
41.	Inventory		
	✓ No		
	Yes. Describe		
42.	Interests in partnershi	ps or joint ventures	
	✓ No	Name of entity: % of ownership:	
	Yes. Give specific	rvaine of entity. //o of ownership.	
	information about them		
43. (Customer lists, mailing	lists, or other compilations	<u> </u>
	√ No		
		clude personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
	No		
	Yes. Descri	be	
	_		
44.	_	roperty you did not already list	
	✓ No		<u> </u>
	Yes. Give specific information		
			_
			<u> </u>
15. A	dd the dollar value of al	I of your entries from Part 5, including any entries for pages you have attached	
	art 5. Write that number		
Part		arm- and Commercial Fishing-Related Property You Own or Have an Interest In. interest in farmland, list it in Part 1.	
46.	Do you own or have a	ny legal or equitable interest in any farm- or commercial fishing-related property?	
	✓ No. Go to Part 7.		Current value of the portion you own?
	Yes. Go to line 47.		Do not deduct secured claims
47.	Farm animals		or exemptions
	Examples: Livestock, pou	ıltry, farm-raised fish	
	✓ No		
	Yes. Describe		

Deb	tor 1	Christo Case 16	6-15452	Doc 1	Filed 05# Docum		Entered 05/ Page 19 of 7	05/116 /11/7/116: <u>43</u> 2	Desc	Main
48.	Cro	ps-either growing	or harvested		Doddiii	0.10	1 ago 10 01 1			
	✓	No								
		Yes. Describe								
49.	Farı	ا m and fishing equi _l	pment, imple	ements, mach	inery, fixtures,	and tools	s of trade			
	✓	No								
		Yes. Describe							_	_
50.	Farı	m and fishing supp	lies, chemic	als, and feed						
	✓	No								
		Yes. Describe							_	
51.	Any	farm- and comme	rcial fishing-ı	elated proper	rty you did not a	already li	st			
	✓	No								
		Yes. Describe							_	
E2 A	ماء لماء		l of worm onto	iaa fram Dart	C including on		for name was have	attacked		
							for pages you have			
									_	
Part							hat You Did Not	List Above		
53.		ou have other prop mples: Season tickets			not aiready list?	,				
	✓	No								
		Yes. Give specific								
		information								
54. A	dd th	e dollar value of all	l of vour entr	ies from Part	7. Write that nu	ımber he	re		>	
			,						•	
Part	8:	List the Totals of	of Each Pa	rt of this F	orm					
55. I	Part 1	: Total real estate, l	line 2					>		
56.	oart 2	total vehicles, line	5			\$9173.00)			
57. P	art 3	: Total personal and	d household	items, line 15	5	\$1550.00				
58. P	art 4	: Total financial ass	ets, line 36			φ1000.00	,			
59. I	Part 5	i: Total business-re	elated proper	ty, line 45						
60. I	Part 6	: Total farm- and fi	shing-relate	d property, lin	ne 52					
61. I	Part 7	: Total other prope	erty not listed	I, line 54						
62.	Γotal	personal property.	Add lines 56 t	hrough 61		\$10723.0]		+ \$10723.00
						ψισιζοι		Copy personal property to	otal >	1 ψ10723.00
										\$10723.00
63. T	otal o	of all property on S	chedule A/B.	Add line 55 +	line 62					

		Case 16-15452	Doc 1	Filed 05	/05/16	Entered 05/	Ω 5/16 17:16:43	Desc Main
Fill i	in this inform	ation to identify your case:				Ų		
Deb	otor 1	Christobal			Enriqu	ez		
		First Name	Mid	ddle Name	Last N	ame		
	otor 2 ouse, if filing)	First Name	Mid	ddle Name	Last N	ame		
Unit	ted States Ba	ankruptcy Court for the:	Northern		District of III			
	se number nown)				(3	State)		
Of	ficial F	orm 106C					_	Check if this is a amended filing
Sc	hedul	e C: The Prop	erty Y	ou Claim	as Ex	empt		12/1
For is to exer rece exer prop	each item o state a s mpted up eive certa mption of perty is d t1: Ident Which set	pecific dollar amou to the amount of a in benefits, and tax	aim as exent as exempt recommended that amediaming? Continuous. 11 U.S.6	empt, you mumpt. Alternationable statutory etirement furnder a law that ount, your exercise Exempt theck one only, events exemptions. 1700. § 522(b)(2)	ist specification well, you will limit. So and semantion will limit the emption will limit specification will limit specification.	y the amount of may claim the fame exemptions be unlimited in the exemption to would be limited buse is filing with your 22(b)(3)	full fair market valus—such as those for dollar amount. Ho a particular dollar do the applicable	u claim. One way of doing so e of the property being r health aids, rights to wever, if you claim an amount and the value of the statutory amount.
		ription of the property a ıle A/B that lists this pro	perty the ow	portion you		of the exemption y ly one box for each e	·	cific laws that allow exemption
	Brief							725 II CS 5/12 1001(a)
	description	Hyundai, Elantra		\$9,173.00				735 ILCS 5/12-1001(c)
	Line from Schedule A	/B: 03				6 of fair market value, cable statutory limit	up to any	
	Brief				ωρρ	out of the state o		735 ILCS 5/12-1001(b)
	description	Chase		none				
	Line from Schedule A	/B: <u>17</u>				of fair market value, cable statutory limit	up to any	
3.	(Subject to	aiming a homestead exe adjustment on 4/01/19 and id you acquire the property	every 3 year	rs after that for cas	es filed on oi	,	,	

Debtor 1 Christo Gase 16-15452 First Name
 Doc 1
 Filed 05/05/126
 Entered 05/05/126 (ILAG) (IL **Additional Page** Part 2:

•	ion of the property and line A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Line from Schedule A/B:	<u>Used</u>	\$700.00	\$700.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	<u>Used</u>	\$650.00	\$650.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Brief description: Line from Schedule A/B:	<u>Used</u> 07	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)

	Case 16-15452	Doc 1 Filed (05/05/16 Entered 05/0	5/16 17:16:43	Desc Main	
Fill in this	information to identify your case:		J			
Debtor 1	Christobal First Name	Middle Name	Enriquez Last Name			
Debtor 2 (Spouse,	if filing) First Name	Middle Name	Last Name			
United St	ates Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case nur (If known)						
Offici	al Form 106D					neck if this is a nended filing
Sche	edule D: Credito	rs Who Hav	ve Claims Secure	d by Prope	rty	12/1
1. Do a	No. Check this box and submit this Yes. Fill in all of the information beloatest All Secured Claims all secured claims. If a creditor has	d by your property? form to the court with you ow. s more than one secured	r name and case number (if k	e to report on this form.	Column B	Column C
	 If more than one creditor has a pa sible, list the claims in alphabetical o 	· ·		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
Cred 200 N DET City Who	FINANCIAL itor's Name RENAISSANCE CTR lumber Street ROIT Michigan 48243 State ZIP Code to owes the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt te debt was incurred 10/1/2015	Hyundai, Elantra Valuas of the date you file Contingent Unliquidated Disputed Nature of lien. Check An agreement you car loan Statutory lien (suc Judgment lien fror Other (including a	te, the claim is: Check all that apply. It all that apply. It made (such as mortgage or secured that as tax lien, mechanic's lien) It is a lawsuit It right to offset)	\$15,669.00	\$9,173.00	\$6,496.00
	Add the dollar value of yo	Last 4 digits of acco	ount number			

here:

		Case 16-15452		05/05/16	Entered 05/	<u>0</u> 5/16 17:16:43	Desc	Main	
Fill in	this informa	ation to identify your case	:						
Debto	or 1	Christobal First Name	Middle Name	Enriqu Last N					
Debto									
(Spot	ise, ii iiiirig)	First Name	Middle Name	Last N	ame				
Unite	d States Ba	nkruptcy Court for the:	Northern	District of III	inois State)				
Case (If kno	number own)			(-					
Offi	cial Fo	rm 106E/F				⊣	Chec	ck if this is an	amended filing
Sc	hedu	le E/F: Cre	ditors Who	Have U	nsecured	l Claims			12/15
106Á/I are lis the bo	B) and on S ted in Sche exes on the	Schedule G: Executory edule D: Creditors Who left. Attach the Contin	xpired leases that could r Contracts and Unexpired of Hold Claims Secured by tuation Page to this page Y Unsecured Claims	d Leases (Officially Property. If mo . On the top of a	al Form 106G). Do r ore space is neede	not include any credito d, copy the Part you ne	rs with parti ed, fill it out	allý secured , number th	d claims that ne entries in
1.	_ ′	ditors have priority unso to Part 2.	secured claims against yo	ou?					
	identify wha possible, lis Part 1. If mo	t type of claim it is. If a cla t the claims in alphabetic ore than one creditor hold	claims. If a creditor has maim has both priority and nor all order according to the creds a particular claim, list the laim, see the instructions fo	npriority amounts editor's name. If y other creditors in	, list that claim here a ou have more than t n Part 3.	nd show both priority and	nonpriority a	amounts. As	much as
							Total claim	Priority amount	Nonpriority amount

Doc 1 Filed 05/05/46 Entered 05/05/16 (43 Desc Main Debtor 1 Documernt Page 24 of 72 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 Associate Pathologists of Joliet \$100.00 Last 4 digits of account number Nonpriority Creditor's Name 333 Madison St When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Joliet Illinois 60435 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt **Unsecured** Is the claim subject to offset? Other. Specify **✓** No Yes 4.2 CALIFORNIA REPUBLIC BK \$11,717.00 Last 4 digits of account number 1001 Nonpriority Creditor's Name 18400 Von Karman Ave When was the debt incurred? 6/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent 92612 Irvine California Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify 072 Automobile **✓** No Yes 4.3 CB/NY&CO \$58.00 Last 4 digits of account number 2751 Nonpriority Creditor's Name P.O. Box 659728 When was the debt incurred? 12/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent San Antonio Texas 78265 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify_

Debts to pension or profit-sharing plans, and other similar debts

CreditCard

Debtor 1 Christo Gase 16-15452 Doc 1 Filed 05#05/126 Entered 05/05/126 (1276):16:43 Desc Main
First Name Document Page 25 of 72

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.				
4.4	City of Joliet		Last 4 digits of account number	\$1,200.00	
	Nonpriority Creditor's Name PO Box 457		When was the debt incurred?		
	Number Street				
			As of the date you file, the claim is: Check all that apply.		
			Contingent		
	Wheeling Illino		Unliquidated		
	City State Who incurred the debt? Check	1	Disputed		
	Debtor 1 only	COTIO.	Type of NONPRIORITY unsecured claim:		
	Debtor 2 only		Student loans		
	Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or divorce that		
	At least one of the debtors and	d another	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	Check if this claim relates	to a community debt	Other. Specify Unsecured		
	Is the claim subject to offset?	•	The other speeding the other speedings		
	✓ No				
	Yes				
4.5	COMENITY BANK/NWYRK&CC)	Last 4 digits of account number	\$58.00	
	Nonpriority Creditor's Name 220 W SCHROCK RD		When was the debt incurred? 12/1/2015		
	Number Street				
			As of the date you file, the claim is: Check all that apply.		
	WESTERVILLE Ohio	43081	Contingent		
	City State	—p	Unliquidated		
	Who incurred the debt? Check Debtor 1 only	cone.	Disputed		
	Debtor 2 only		Type of NONPRIORITY unsecured claim:		
	Debtor 1 and Debtor 2 only		Student loans		
	At least one of the debtors and	d another	Obligations arising out of a separation agreement or divorce that		
	H		you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts		
	Check if this claim relates it is the claim subject to offset?	to a community dept	Other. Specify CreditCard		
	No		▼ Other opening		
	Yes				
16	DirecTV			\$200.00	
4.0	Nonpriority Creditor's Name		Last 4 digits of account number 5824	\$300.00	
	2230 E Imperial Hwy Number Street		When was the debt incurred?n/a		
	Number Officer		As of the date you file, the claim is: Check all that apply.		
	FI O I	00045	Contingent		
	El Segundo Califo City State		Unliquidated		
	Who incurred the debt? Check	cone.	Disputed		
	✓ Debtor 1 only		Type of NONPRIORITY unsecured claim:		
	Debtor 2 only		Student loans		
	Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or divorce that		
	At least one of the debtors and	d another	you did not report as priority claims		
	Check if this claim relates	to a community debt	Debts to pension or profit-sharing plans, and other similar debts		
	Is the claim subject to offset?		✓ Other. Specify Unsecured		
	✓ No				
	Yes				

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First Name Document Page 26 of 72

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.					
4.7	EMP of Will county	- Last 4 digits of account number	\$300.00			
	Nonpriority Creditor's Name PO BOX 14000	When was the debt incurred?	·			
	Number Street					
		As of the date you file, the claim is: Check all that apply.				
	Belfast Maine 04915	Contingent				
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only	Disputed				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	Student loans				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	✓ Other. Specify <u>Unsecured</u>				
	✓ No					
	Yes					
4.8	ESCALLATE LLC	Last 4 digits of account number 5576	\$1,228.00			
	Nonpriority Creditor's Name 1606 E TURKEYFOOT LAKE R	When was the debt incurred? 2/1/2016				
	Number Street					
		As of the date you file, the claim is: Check all that apply.				
	AKRON Ohio 44312	Contingent				
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only	Disputed				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	Student loans				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	✓ 001 Collection; Collecting for ORIGINAL				
	✓ No	CREDITOR: MEDICAL PAYMENT Other. Specify DATA				
	Yes					
4.9	ESCALLATE LLC	Last 4 digits of account number 5575	\$315.00			
	Nonpriority Creditor's Name 1606 E TURKEYFOOT LAKE R	When was the debt incurred? 2/1/2016				
	Number Street					
		As of the date you file, the claim is: Check all that apply.				
	AKRON Ohio 44312	Contingent				
	City State Zip Code Who incurred the debt? Check one.	Unliquidated				
	Debtor 1 only	Disputed				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	Student loans				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	■ 001 Collection; Collecting for ORIGINAL				
	✓ No	CREDITOR: MEDICAL PAYMENT Other. Specify DATA				
	Yes	Outer. Opeony DATA				

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Part 2: Your NONPRIORITY Unsecured Claims - Con-	tinuation Page	
After listing any entries on this page, number them beginning	ing with 4.5, followed by 4.6, and so forth.	Total claim
4.10 ILLINOIS COLLECTION SE	Last 4 digits of account number 2839	\$195.00
Nonpriority Creditor's Name 8231 185TH ST STE 100	When was the debt incurred? 9/1/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
TINLEY PARK Illinois 60487 City State Zip Code	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
At least one of the debtors and another	you did not report as priority claims	
Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	✓ 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL PAYMENT	
✓ No	Other. Specify DATA	
L Yes		
4.11 ILLINOIS COLLECTION SE Nonpriority Creditor's Name	Last 4 digits of account number2841	\$168.00
8231 185TH ST STE 100 Number Street	When was the debt incurred? 9/1/2015	
Number Street	As of the date you file, the claim is: Check all that apply.	
TINLEY PARK Illinois 60487	Contingent	
TINLEY PARK Illinois 60487 City State Zip Code	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only	Type of NONPRIORITY unsecured claim:	
Debtor 2 only	Student loans	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
H	you did not report as priority claims	
Check if this claim relates to a community debt Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL	
No	CREDITOR: MEDICAL PAYMENT	
Yes	Other. Specify DATA	
4.12 Joliet Radiology, S.C.		\$600.00
Nonpriority Creditor's Name	Last 4 digits of account number 4801	<u> </u>
36910 Treasury Center Number Street	When was the debt incurred?n/a	
	As of the date you file, the claim is: Check all that apply.	
Chicago Illinois 60694	Contingent	
City State Zip Code	Unliquidated	
Who incurred the debt? Check one. Debtor 1 only	Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify Unsecured	
No		
Yes		

Debtor 1 Christo Gase 16-15452 Doc 1 Filed 05#05/426 Entered 05/05/416/43/6:43 Desc Main
First Name Docume Page 28 of 72

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.13	Nonpriority Creditor's Name 36910 Treasury Center	Last 4 digits of account number When was the debt incurred?n/a	\$100.00
	Number Street Chicago Illinois 60694 City State Zip Code	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	
	Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Unsecured	
4.14	Presence Saint Joseph Medical Center Nonpriority Creditor's Name 333 Madison St Number Street Joliet Illinois 60435 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	When was the debt incurred?	\$2,000.00
4.15	Presence Saint Joseph Medical Center Nonpriority Creditor's Name 333 Madison St Number Street Joliet Illinois 60435	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$400.00
	City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ✓ No ✓ Yes	Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	

Debtor 1 Christo Gase 16-15452 Doc 1 Filed 05#05/466 Entered 05/05/466/47.46:43 Desc Main
First Name Document Page

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning	g with 4.5, followed by 4.6, and so forth.	Total claim
Presence Saint Joseph Medical Center	Last 4 digits of account number 5896 When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$10,000.00
☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Is the claim subject to offset? ☑ No ☐ Yes	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Unsecured	
A.17 Presence Saint Joseph Medical Center Nonpriority Creditor's Name 333 Madison St Number Street Joliet Illinois 60435 City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify	\$1,300.00
A.18 TARGET/TD Nonpriority Creditor's Name 1000 Nicollet Mall Number Street Minneapolis Minnesota 55403 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No	Last 4 digits of account number3352	\$258.00

Filed 05±05/426 Entered 05/05/126/43/346:43 Desc Main Document Page 30 of 72 Doc 1 Debtor 1 Christo@ase 16-15452

After listing any entries on this page, number them beginning	ng with 4.5, followed by 4.6, and so forth.	Total claim
19 TD BANK USA/TARGETCRED Nonpriority Creditor's Name PO BOX 673 Number Street	Last 4 digits of account number When was the debt incurred? 1/1/2016 As of the date you file, the claim is: Check all that apply.	\$258.00
MINNEAPOLIS Minnesota 55440 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify CreditCard	

Debtor 1 Christo Gase 16-15452 Doc 1 Filed 05#05/126 Entered 05/05/126 (147) vil 6:43 Desc Main

irst Name

Middle Name DC

6i. Other. Add all other nonpriority unsecured claims. Write that 6i.

amount here.

6j. Total. Add lines 6f through 6i.

Page 31 of 72

Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$0.00 6d. Other. Add all other priority unsecured claims. Write that \$0.00 amount here. 6e. Total. Add lines 6a through 6d. \$0.00 **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or divorce 6g. that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h.

\$30,555.00

6j.

	Case 16-1545		5/05/16 Ente	ered 05/0 <mark>5/16 17:16:43</mark>	Desc Main
Debtor 1	Christobal		Enriquez		
Debtor 2 (Spouse, if filing)	First Name	Middle Name Middle Name	Last Name		
	nkruptcy Court for the:	Northern	Last Name District of Illinois		
Case number (If known)			(State)		
Official F	Form 106G				Check if this is ar amended filing
Schedul	e G: Execut	ory Contracts	and Unexp	ired Leases	12/1
	, copy the additional pa			n are equally responsible for supply o this page. On the top of any additi	
•	•	contracts or unexpired m with the court with your othe		nothing else to report on this form.	
Yes. Fill i	n all of the information be	elow even if the contracts or lea	ases are listed on Sche	edule A/B: Property (Official Form 106A	√B).
	•	. ,		Then state what each contract or le ore examples of executory contracts an	
Person	or company with whon	n you have the contract or le	ease	State what the contrac	t or lease is for

		Case 16-15452	2 Doc 1 Filed 0	15/05/16 Entered	05/05/16 17:16:43	Desc Main
Fill	in this inform	ation to identify your case		J	0/10 17:10:10	Dood Main
De	btor 1	Christobal		Enriquez		
D-	ht 0	First Name	Middle Name	Last Name		
	btor 2 ouse, if filing)	First Name	Middle Name	Last Name	_	
Un	ited States Ba	ankruptcy Court for the:	Northern	District of Illinois		
	se number (nown)			(State)	_	
	-					Check if this is a
\bigcirc 1	fficial F	Form 106H				amended filing
		-	debtere			
50	nedui	e H: Your Co	deptors			12/1
evei	ry question.			t list either spouse as a codebto		ase number (if known). Answer
	Louisiana, N	•	ived in a community proper erto Rico, Texas, Washington,	· · ·	unity property states and territor	ies include Arizona, California, Idaho,
		,	ouse, or legal equivalent live v	with you at the time?		
	☐ Y		tate or territory did you live?	Fill in the	name and current address of th	at person.
		Name of your spouse, for	ormer spouse, or legal equival	ent	-	
		Number Street			-	
		City	State	Zip Code	-	
3.	as a codeb	tor only if that person is	s a guarantor or cosigner. I	Make sure you have listed the		the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> olumn 2.
	Column 1:	Your codebtor			Column 2: The creditor to	whom you owe the debt

Check all schedules that apply:

Fill in	this information to identify		V0=14.0 =		5/16 17	:16:43	Desc N	/lain	
riii in	this information to identify	y your case.	пспс га	ig e o-r o r	72				
Debtor [*]	1 Christobal		Enriquez		_				
	First Name	Middle Name	Last Name	9		Check if this	s is:		
Debtor 2					_	_	nded filing		
(Spouse	e, if filing) First Name	Middle Name	Last Name	9		=	Ü		
United S	States Bankruptcy Court for the:	Northern	District of Illinois		-		ement showing as as of the f		-petition chapter 13 g date:
Case nu (If knowr			(510.10		-	MM / D	D/YYYY	_	
	cial Form 106l								
Sche	edule I: Your Inc	ome							12/15
ages,		e. If more space is neede se number (if known). An			heet to this f	orm. On t	he top of	any a	dditional
	Fill in your employment		Debtor 1			Debtor 2			
	information.	Employment status							
	If you have more than one job,	Employment status	✓ Employed Not Employed			☐ Employed ☐ Not Employed			
	attach a separate page with information about additional	Occupation							
	employers.	Employer's name	Mac Rak INC						
	Include part time, seasonal,	Employer's address	20 Henderson Ave						
	or self-employed work.		Number Street			Number Stre	eet		
	Occupation may include					-			
	student or homemaker, if it applies.		Joliet	Illinois	60432				
			City	State	Zip Code	City		State	Zip Code
		How long employed there?							
Estima are sep If you of a sepa	parated. or your non-filing spouse have mo rate sheet to this form. ist monthly gross wages, salar	Monthly Income date you file this form. If you have than one employer, combine the commissions (before all cludate what the monthly wage wo	ne information for payroll 2	all employers			ow. If you ne		
	stimate and list monthly overt	3.	+ \$0.00						

4. Calculate gross income. Add line 2 + line 3.

\$2,965.65

Debtor 1 Christob Case 16-15452 Filed 05/05/46 Entered @5405/hb6 47::16:43 Desc Main Doc 1 Middle Name Documentame Page 35 of 72 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$2,965.65 5. List all payroll deductions: \$697.97 5a. Tax, Medicare, and Social Security deductions 5a. 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$74.14 5f. Domestic support obligations 5f. \$0.00 5g. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. -\$0.00 \$772.11 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$2,193.53 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 8a. monthly net income. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 8g. Pension or retirement income \$0.00 8g. 8h. Other monthly income. Specify: 8h. -\$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$0.00 10. Calculate monthly income. Add line 7 + line 9. \$2,193.53 \$2,193.53 10 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$2,193.53 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

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	Case 16-15452	P Doc 1 Filed 0	5/05/16 Entered 05/0	5/16 17:16:43	Desc M	lain
Fill in this inform	ation to identify your case		U			
Debtor 1	Christobal		Enriquez			
	First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filing		
United States Ba	ankruptcy Court for the:	Northern	District of Illinois	A supplement sho		
0			(State)	expenses as of the	following da	ate:
Case number (If known)				MM / DD / \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
				MM / DD / YYYY		
Official F	orm 106J					
Schedul	e J: Your Ex	penses				12/1
			e filing together, both are equally r	esponsible for supplying	correct	
information. If m	ore space is needed, a		form. On the top of any additional			umber
<u>`</u>	er every question.					
	ribe Your Househo	ld				
1. Is this a joint	case?					
✓ No. Go	o line 2					
Yes. Do	es Debtor 2 live in a sep	parate household?				
_ г	No					
_		Official Forms 106 L2 Evnens	ses for Separate Household of Debto	r 2		
2. De veu beve	<u> </u>		ses for Separate Flouseriola of Debtor	2.		
2. Do you have	=				_	
Do not list De Debtor 2.		s. Fill out this information for ch dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dep with you?	pendent live ?
3. Do your exp	enses include					
	people other)				
than yourself and	Your Ye	s				
dependents	•					
_	_					
Part 2: Estim	ate Your Ongoing	Monthly Expenses				
-	-		you are using this form as a supple	-	-	
expenses as of applicable date		iptcy is filed. If this is a sup	plemental Schedule J, check the I	oox at the top of the form	and fill in	tne
• •		sh government assistance	if you know the value of			
		on <i>Schedule I: Your Income</i>				Your expenses
4. The rental of	r home ownership expe	enses for your residence. Ind	clude first mortgage payments and			\$400.00
	the ground or lot. 4.	•	3 3 7 7 7 1 1 1 1 1 1 1		4.	
If not inclu	ded in line 4:					
4a. Real est	ate taxes				4a	\$0.00
4b. Property	, homeowner's, or renter's	s insurance			4b.	\$0.00

\$0.00

4d.

4d. Homeowner's association or condominium dues

Debtor 1 Christo Gase 16-15452 Doc 1 Filed 05#05/126 Entered 05/05/126 1243 Desc Main

Document Page 38 of 72 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$100.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$200.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$350.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$100.00 9. 10. Personal care products and services \$100.00 10. 11. Medical and dental expenses \$35.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$400.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$150.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$330.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Debtor 1 Christo Gase 16-15452 Doc 1 Filed 05#05/126 Entered 05/05/126 First Name Middle Name Docume Page 39 of 72	(idlarowal 6:43 Desc Ma	ain
21. Other. Specify:	21	\$0.00
· · ·	21	
22. Calculate your monthly expenses.		\$2,165.00
22a. Add lines 4 through 21.		\$0.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$2,165.00
22c. Add line 22a and 22b. The result is your monthly expenses.	22.	Ψ2,100.00
23.Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a	\$2,193.53
23b. Copy your monthly expenses from line 22 above.	23b	\$2,165.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$28.53
24. Do you expect an increase or decrease in your expenses within the year after you file this form?		
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
✓ No		
Yes		
Explain here:		

	Case 16-15452	Doo 1 Filed 0	E/05/16 Enter	rad 05/05/16 17:16:40	Dogo Main
Fill in this infor	mation to identify your case:		5/U5/Th Filler	red 05/05/16 17:16:43	Desc Main
Debtor 1	Christobal		Enriquez		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)			(Gidio)		
Official	Form 106Dec	<u>)</u>			Check if this is a amended filing
Declara	tion About an	Individual De	btor's Sche	dules	12/1
f two married	people are filing together	, both are equally responsi	ble for supplying corre	ect information.	
Part 1: Sign	n Below	one who is NOT an attorney	to help you fill out bar	nkruptcy forms?	
✓ No					
	Name of person		Attach Bankrupt Signature (Offici	tcy Petition Preparer's Notice, Decla ial Form 119).	aration, and
that they /s/ Chris	enalty of perjury, I declare are true and correct. stobal Enriquez of Debtor 1	that I have read the summa	×	I with this declaration and ature of Debtor 2	
Date 5/5/			Date	MM/DD/YYYY	

Fill in	n this inform	Case 16-		Doc 1	Filed	05/05/16	Entered (15/0 <mark>5/16 17:</mark>	16:43	Desc M	ain
Deb		Christobal	our ouse.			Enriqu	ıez				
Dob	tor 2	First Name		Middle	Name	Last N		_			
		First Name		Middle	Name	Last N	ame	_			
Unite	ed States Ba	ankruptcy Court fo	or the: N	orthern		District of III		_			
	e number lown)					(5	State)	_			
Off	ficial F	orm 10	7								Check if this is a amended filing
				Affairs	for	Individu	als Filin	g for Ban	krupte	CV	12/1
Be as	complete	and accurate a	s possible.	f two married	l people	are filing togeth	er, both are equ	ally responsible	for supplyi	ng correct in	formation. If more
		•				•		our name and ca	se number	(IT KNOWN). A	Inswer every question
Part	1: Give	Details Abou	it Your Ma	rital Status	s and V	Vhere You Li	ved Before				
1.	What is	your current ma	arital status	?							
	☐ Mar	ried married									
2.	During th	ne last 3 years, l	nave you liv	ed anywhere	other tha	an where you liv	e now?				
	☐ No ✓ Yes.	List all of the place	ces you lived	in the last 3 ye	ars. Do n	ot include where	you live now.				
	Deb	tor 1:			Dates there	s Debtor 1 lived	Debtor 2:			Date ther	es Debtor 2 lived e
							Same	as Debtor 1			Same as Debtor 1
		N Broadway			- From	6/1/2014				Fror	n
	Num 	ber Street			_ To	2/1/2015	Number S	treet		To	···
	Jolie	t III	inois	60435							
	City		tate	Zip Code	_		City	State	Zip Co	ode	
							Same a	as Debtor 1			Same as Debtor 1
	Num	ber Street			From		Number S	treet		Fror	m
					_ To					To	
	City	S	tate	Zip Code	_		City	State	Zip Co	ode	
3.	Within the	last 8 vears, did	l vou ever li	ve with a spo	use or le	gal equivalent i	n a community	property state or	territory?	Community pr	operty states and
		•	•	•		• .	•	Washington, and V	• .	community pro	sporty states and
Į	✓ No										
	Yes. M	ake sure you fill c	ut Schedule	H: Your Codel	otors (Off	icial Form 106H)					

Filed 05#05/426 Entered 05/05/16/147:416:43 Desc Main Document Page 42 of 72 Doc 1 Debtor 1 Christo Gase 16-15452

First Name

Part	2: Explain the Sources of Your Inc	ome	<u> </u>		
4.	Did you have any income from employment. Fill in the total amount of income you received for activities. If you are filing a joint case and you have the limit of the limit o	rom all jobs and all businesses,	including part-time		
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$10239.00	Wages, commissions, bonuses, tips Operating a business	
	For last calendar year: (January 1 to December 31,	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$20913.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
	For the calendar year before that: (January 1 to December 31,	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$25000.00	☐ Wages, commissions, bonuses, tips ☐ Operating a business	
;	Did you receive any other income during this include income regardless of whether that incomponentit payments; pensions; rental income; intervand you have income that you received together, List each source and the gross income from each No Yes. Fill in the details.	ne is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1.	income are alimony; child su from lawsuits; royalties; and	gambling and lottery winnings.	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:				
	For last calendar year: (January 1 to December 31,				
	For the calendar year before that: (January 1 to December 31,				

Debtor 1 Christo Gase 16-15452 Doc 1 Filed 05/05/146 Entered 05/05/146 (143 Desc Main

List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ✓ No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment Suppliers or City State Zip Code vendors

Creditor's Name

Creditor's Name

Number

City

Street

Street

State

State

Zip Code

Zip Code

Number

City

Other

Mortgage

Car

Other

Car

Other

Credit card Loan repayment Suppliers or vendors

Mortgage

Credit card Loan repayment Suppliers or vendors

Christo@ase 16-15452 Doc 1 Filed 05#05/426 Entered 05/05/146/147/416:43 Desc Main Debtor 1 Document Page 44 of 72 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Christo Gase 16-15452 First Name Filed 05#05/426 Entered 05/05/416/1476/143 Desc Main Doc 1

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Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9.	such matters, includ			party in any lawsuit aims actions, divorces				stody modifications, and cont	ract
	lo 'es. Fill in the details								
			Nature	of the case	Court or a	gency		Status of the case	
	Case title							Pending	
	-				Court Name	Э		On appeal	
	Case number				Number Str	root		Concluded	
					Number 30	eei		_	
					City	State	Zip Code	_	
	Case title							Pending	
					Court Name	9		On appeal	
	Case number				Nb Ot	1		Concluded	
					Number Sti	eet		_	
					City	State	Zip Code	_	
	Yes. Fill in the inform	nation below.		Describe the prop	erty		Date	Value of the property	
				Explain what happ	ened				
	Number Street								
				Property was re					
				Property was fo					
				Property was g					
	City	State	Zip Code		ttached, seized, o	or ieviea.	_		
				Describe the prop	erty		Date	Value of the property	
	Creditor's Name			Francis what have					
				Explain what happ	enea				
	Number Street								
				Property was re	•				
				Property was fo					
				Property was g		ou louis d			
	City	State	Zip Code	Property was at	ttached, seized, o	i ieviea.			

Deb	tor 1		<u>1 05#05/126 Entered </u> 05/05/116/11/7√116: cument Page 46 of 72	43 Desc	<u>Main</u>
11.			reditor, including a bank or financial institution, set of	f any amounts fr	om your
		No Yes. Fill in the details.			
			Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name			
		Number Street	Last 4 digits of account number: XXXX-		
		City State Zip Code			
12.		nin 1 year before you filed for bankruptcy, was any of iver, a custodian, or another official?	your property in the possession of an assignee for the	e benefit of credi	tors, a court-appointed
	✓	No Yes			
Part	5:	List Certain Gifts and Contributions			
13.	Wi	thin 2 years before you filed for bankruptcy, did you on the No Yes. Fill in the details for each gift.	give any gifts with a total value of more than \$600 per	person?	
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift			
		Number Street			
		City State Zip Code Person's relationship to you			
		Person to Whom You Gave the Gift			
		Number Street			
		City State Zip Code Person's relationship to you			
		<u> </u>			

		First Name	Iviladie Name D	ocument Page 47 of 72		
14.	With	nin 2 years before you filed fo		give any gifts or contributions with a total value of mor	e than \$600 to an	y charity?
		No Yes. Fill in the details for each of	gift or contribution.			
		Gifts with a total value of mo	ore than \$600	Describe the gifts	Dates you gave the gifts	Value
		Charity's Name		-		
				- -		
		Number Street	7'. 0. 1.	_		
Part (a. I	City State List Certain Losses	Zip Code			
15.	With		bankruptcy or since y	ou filed for bankruptcy, did you lose anything because	of theft, fire, othe	r disaster, or
		No Yes. Fill in the details.				
		Describe the property you lo how the loss occurred	est and	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
				Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		
Part 7	7: L	ist Certain Payments o	r Transfers			
:	seek	ing bankruptcy or preparing	a bankruptcy petition	or anyone else acting on your behalf pay or transfer any p? !it counseling agencies for services required in your bankrupto		ne you consulted about
		No	nation proparoto, or oroa	in oodinooling agonoloo ioi oolivood ioquiloa iii yodi baliikapid		
	✓ `	Yes. Fill in the details.		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		Ingram, Brent		Attomey's Fee - 0.00	5/5/2016	\$0.00
		Person Who Was Paid		_		
		Number Street		_		
		City State	Zip Code	-		
		Email or website address None		-		
		Person Who Made the Paymen	nt, if Not You	-	1	
		Person Who Was Paid		-		
		Number Street		- -		
		City State	Zip Code	-		
				The state of the s		
		Email or website address		-		

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Deb	tor 1	Christo Gase First Name	16-15452	Doc 1 File	d 05 <u>#05√26</u> ocumetht ^{me}	<u>Entered</u> 05/05 Page 48 of 72	/116 /1476/116:	43 Desc	<u>Main</u>	
17.	you	deal with your	creditors or to ma	nkruptcy, did you or ake payments to you that you listed on line 1	r creditors?	g on your behalf pay o	or transfer any p	property to anyor	ne who p	promised to help
		No	ata ila							
	Ц	Yes. Fill in the d	etaiis.		Description and	value of any property	transferred	Date payment or transfer was made	Amoui	nt of payment
		Person Who W	as Paid						-	
		Number Stre	et							
		City	State	Zip Code						
18.	ordi: Inclu	nary course of ide both outright	your business or transfers and tran re already listed on	financial affairs? sfers made as security		wise transfer any proping of a security interest			-	
	_				Description and property transfe			property or paymets paid in exch		Date transfer was made
		Person Who Re	eceived Transfer							
		Number Stre	et							
		City Person's relation	State onship to you	Zip Code						
		Person Who Re	eceived Transfer							
		Number Stre	et							
		City Person's relation	State onship to you	Zip Code						
19.	(The	se are often call	fore you filed for ed asset-protection		transfer any prope	erty to a self-settled tru	ıst or similar de	evice of which yo	u are a l	oeneficiary?
		No Yes. Fill in the d	etails.							
					Description and	value of the property	transferred			Date transfer was made
		Name of trust								

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Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20.	or tra	in 1 year before you filed for bankruptcy, were a ansferred? de checking, savings, money market, or other financieratives, associations, and other financial institutions	al accounts; certificates of deposit; sh			
		No Yes. Fill in the details.				
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Person Who Was Paid	— XXXX-	Checking Savings		
		Number Street	-	Money market Brokerage		
		City State Zip Code	_	Other		
		Person Who Was Paid	— XXXX-	Checking Savings		
		Number Street	_	Money market Brokerage Other		
		City State Zip Code	_	Guici		
21.		ou now have, or did you have within 1 year befo ables?	re you filed for bankruptcy, any sa	fe deposit box or other depositor	ry for securities, o	cash, or other
		No Yes. Fill in the details.				
			Who else had access to it?	Describe the contents	5	Do you still have it?
			Name			☐ No ☐ Yes
			Number Street City State Zip	Code		
		City State Zip Code	,			
22.	✓	you stored property in a storage unit or place on No Yes. Fill in the details.	other than your home within 1 year	r before you filed for bankruptcy	?	
			Who else had access to it?	Describe the contents	S	Do you still have it?
		Name of Storage Facility	Name			☐ No ☐ Yes
			Number Street			L 199
		City State Zip Code	City State Zip	Code		

Deb	tor 1	Christo Gase 16-15452 Doc 1 First Name Middle Name	Filed 05#6	05√426 <u>Er</u> Ent ^{me} Paç	ntered_0 5 /0 ge 50 of 72	1561.6 11.73 Desc Mair	1
Part	9:	Identify Property You Hold or Contro	I for Someo	ne Else			
23.	_	you hold or control any property that someone No Yes. Fill in the details.	e else owns? Ir	nclude any pro	perty you borro	wed from, are storing for, or hold in true	st for someone.
	ш	Too. I ill ill die detaile.	Where is the	e property?		Describe the contents	Value
		Owner's Name	Number Stre	eet		-	
		Number Street	_			-	
			City	State	Zip Code	-	
		City State Zip Code	— —	Olaic	Zip Oode		
Dow	40.		oformation				
		Give Details About Environmental In	normation				
For		urpose of Part 10, the following definitions apply:					
	ha	nvironmental law means any federal, state, or loca azardous or toxic substances, wastes, or material i cluding statutes or regulations controlling the clea	into the air, land,	soil, surface wa	ater, groundwater,		
		ite means any location, facility, or property as define used to own, operate, or utilize it, including dispo	•	vironmental law,	whether you now	own, operate, or utilize it	
	■ H	azardous material means anything an environment axic substance, hazardous material, pollutant, contr	tal law defines as		aste, hazardous s	substance,	
Rer		I notices, releases, and proceedings that you know	•		occurred.		
1 10	, , , , , , , , , , , , , , , , , , ,	Thomson, raidades, and proceedings that you whom	r about, rogaraio	oo or whom aloy	oodinod.		
24.	Has	any governmental unit notified you that you i	may be liable o	r potentially lia	able under or in	violation of an environmental law?	
	씜	No Yes. Fill in the details.					
	_		Governmen	tal unit		Environmental law, if you know it	Date of notice
		Name of site	Governmenta	al unit		-	
		Number Street	Number Stre			-	
		Number Street	Number Site	, C .			
			City	State	Zip Code	_	
		City State Zip Code	_				
25.	Hav	e you notified any governmental unit of any re	elease of hazar	dous material	?		
	$\overline{\mathbf{A}}$	No					
		Yes. Fill in the details.					
			Governmen	tal unit		Environmental law, if you know it	Date of notice
		Name of site	Governmenta	al unit		-	
		Number Street	Number Stre	eet		-	
			City	State	Zip Code	-	
		City State Zip Code	_				
							_

Debte	or 1	Christo Gase 16-15452 First Name		<u>led 05#05/426</u> Documenter	Entered 05/05 Page 51 of 72	16.43 (16.76)	Desc Main
26.	Hav	e you been a party in any judici	ial or administrativ	e proceeding under	any environmental law	? Include settlements	and orders.
	✓	No					
	Ш	Yes. Fill in the details.		Court or agency		Nature of the case	Status of the
		Occasion.		· · · · · · · · · · · · · · · · · · ·			case
		Case title		On at Norman			Pending
			. <u>-</u>	Court Name			On appeal
		Case number		Number Street			Concluded
			(City Stat	te Zip Code		
Part '	11:	Give Details About Your	Business or C	onnections to A	ny Business		
27.	With	hin 4 years before you filed for	bankruptcy, did yo	u own a business o	r have any of the follow	ing connections to an	y business?
		A sole proprietor or self-emp	oloyed in a trade, pro	ofession, or other activ	vity, either full-time or part	-time	
		A member of a limited liabilit			•		
		A partner in a partnership An officer, director, or management	ning executive of a c	corporation			
		An owner of at least 5% of the	_		ion		
	✓	No. None of the above applies. Go	o to Part 12.				
		Yes. Check all that apply above a	nd fill in the details b				
				Describe the na	ature of the business		entification number Do not all Security number or ITIN.
		Business Name				EIN:	
						Data a lavada	
		Number Street		Name of accou	ntant or bookkeeper	Dates busine	existed
		City State	Zip Code	_		From	To
				Describe the na	ature of the business		entification number Do not al Security number or ITIN.
		Business Name				EIN:	
				_		Data a la calina	
		Number Street		Name of accou	ntant or bookkeeper	Dates busine	existed
		City State	Zip Code			From	To
				Describe the na	ature of the business		entification number Do not al Security number or ITIN.
		Business Name				EIN:	
						Dates busine	ose evieted
		Number Street		Name of accou	intant or bookkeeper	Dates Dusine	:22 CXISIEU
		City State	Zip Code			From	То

	First Name	<u>16-15452</u>	Doc 1 Middle Name	Filed 05#05/426 Documether	<u>⊨nie</u> Page	<u>ereu</u> เซลเยช 52 of 72	h166@k76w16: <u>43</u>	Desc	Main	
	hin 2 years befo litors, or other p	•	bankruptcy, did	you give a financial s			ut your business? I	nclude all f	inancial institu	tions,
V	No Yes. Fill in the de	steile beleur								
ш	res. Fill in the de	etalis below.		Date issued						
	Name			MM/DD/YYYY						
	Number Stre	et								
	City	State	Zip Code)						
Part 12:	Sign Below									
and o	correct. I unders	tand that makir	ng a false statei	cial Affairs and any att	erty, or ol	btaining money	or property by frau	ıd in conn	ection with a	true
and o	correct. I unders ruptcy case can	tand that makir	ng a false statei		erty, or ol	btaining money ars, or both. 18	or property by frau	ıd in conn	ection with a	e true
and o	correct. I unders ruptcy case can	tand that makir	ng a false state up to \$250,000, o	ment, concealing prop	erty, or ol	btaining money	or property by frau	ıd in conn	ection with a	e true
and o	correct. I unders	tand that makir result in fines u	ng a false statei ip to \$250,000, o riquez	ment, concealing prop	erty, or ol	btaining money ars, or both. 18	or property by frau	ıd in conn	ection with a	true
and o	correct. I unders	stand that making result in fines under the state of the	ng a false statei ip to \$250,000, o riquez	ment, concealing prop	erty, or ol	btaining money ars, or both. 18	or property by frau U.S.C. §§ 152, 1341,	ıd in conn	ection with a	true
and d bank	correct. I unders ruptcy case can Sig	stand that making result in fines under the state of the	ng a false state up to \$250,000, o riquez 1	ment, concealing prop	erty, or ol oto 20 yea	btaining money ars, or both. 18 Signature Date	or property by frau U.S.C. §§ 152, 1341, of Debtor 2	id in conno	ection with a 3571.	true
and d bank	correct. I unders ruptcy case can Sig	stand that making result in fines under the state of the	ng a false state up to \$250,000, o riquez 1	ment, concealing prop or imprisonment for up	erty, or ol oto 20 yea	btaining money ars, or both. 18 Signature Date	or property by frau U.S.C. §§ 152, 1341, of Debtor 2	id in conno	ection with a 3571.	true
and obank	correct. I unders ruptcy case can Sig	stand that making result in fines under the state of the	ng a false state up to \$250,000, o riquez 1	ment, concealing prop or imprisonment for up	erty, or ol oto 20 yea	btaining money ars, or both. 18 Signature Date	or property by frau U.S.C. §§ 152, 1341, of Debtor 2	id in conno	ection with a 3571.	true
Did y	correct. I unders ruptcy case can Signation Date ou attach additions	stand that making result in fines under the second state of the second state of the second se	ng a false state up to \$250,000, o riquez 1	ment, concealing prop or imprisonment for up	erty, or ol to 20 yea	Signature Date Date Date	or property by frau U.S.C. §§ 152, 1341, of Debtor 2	id in conno	ection with a 3571.	true
Did y	correct. I unders ruptcy case can Signation Date ou attach additions	stand that making result in fines under the second state of the second state of the second se	ng a false state up to \$250,000, o riquez 1	ment, concealing prop or imprisonment for up of Financial Affairs fo	erty, or ol to 20 yea	Signature Date Date Date Date Date Date Date	or property by frau U.S.C. §§ 152, 1341, of Debtor 2	id in conno 1519, and Form 107)	ection with a 3571.	true

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Fill in this inform	ation to identify your case		Ja/Ua/Th Enleter	1.05/05/16 17:16:43	Desc Main
Debtor 1	Christobal	AC 1 11 A1	Enriquez		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	Northern	District of Illinois		
Case number (If known)			(State)		
					Check if this is an amended filing
Official F	orm 108				
		on for Individu	uals Filing Und	der Chapter 7	12/15

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? No. Creditor's Surrender the property. name: ALLY FINANCIAL Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Hyundai, Elantra | Value: \$9,173.00 Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Surrender the property. No. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

1	Case 16-15452 Christobal First Name List Your Unexpired Per	Middle Na		Entered 05/05/16 Page 54 of 72 ne	17:16: <u>43</u>	Desc Main
For any	unexpired personal property I	ease that you l	isted in Schedule G: Ex xpired leases are leases	that are still in effect; the leas		icial Form 106G), fill in the ot yet ended. You may assume an
De	scribe your unexpired personal	property lease	s		Will the lea	se be assumed?
Les	sor's name:				☐ No ☐ Yes	
	scription of leased perty:					
Les	sor's name:				☐ No☐ Yes	
	scription of leased perty:					
Les	sor's name:				☐ No☐ Yes	
	scription of leased perty:					
Les	sor's name:				☐ No☐ Yes	
	scription of leased perty:					
Les	sor's name:				☐ No ☐ Yes	
	scription of leased perty:					
Les	sor's name:				☐ No ☐ Yes	
	scription of leased perty:					
Les	sor's name:				☐ No☐ Yes	
	scription of leased perty:					
Part 3:	Sign Below					
	er penalty of perjury, I declare t is subject to an unexpired leas		cated my intention abou	t any property of my estate th	at secures a de	bt and any personal property

×	/s/ Christobal Enriquez	*
	Signature of Debtor 1	Signature of Debtor 1
	Date 5/5/2016	Date
	MM/DD/YYYY	MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Christobal Enriquez		Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATION C	F ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behal	year before the filing of the peti-	tion in bankruptcy, or agreed t	o be paid to me, for services
	For legal services, I have agreed to	accept		\$1,400.0
	Prior to the filing of this statement I	have received		\$0.0
	Balance Due			\$1,400.0
2.	The source of the compensation paid	I to me was:		
	✓ Debtor	Other (specify)		
3.	The source of the compensation paid	d to me is:		
	Debtor	Other (specify)		
4.	I have not agreed to share the a members and associates of my	bove-disclosed compensation w law firm.	ith any other person unless the	ey are
	I have agreed to share the above members or associates of my la the people sharing in the compe	w firm. A copy of the agreemen		
5.	In return for the above-disclosed fee		·	

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

	CERTIFICATION
	CERTIFICATION
I certify that the foregoing is a complete the debtor(s) in this bankruptcy proceedings	e statement of any agreement or arrangement for payment to me for representation of s.
5/5/2016	/s/ Brent Ingram
Date	Signature of Attorney

Semrad Law Firm

Name of law firm

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-15452 Doc 1 Filed 05/05/16 Entered 05/05/16 17:16:43 Desc Main UNITED STATES BANKBURTCY COURT Northern District of Illinois

In re:	Enriquez, Christobal Debtor(s)	Case No		
	(7)	Chapter.	Chapter7	
	VERIFICATIO	N OF CREDITOR MATI	RIX	
	The above named Debtors hereby verify that the a	ttached list of creditors is true a	nd correct to the best of their knowledg	e.
Date:	5/5/2016	/s/ Enriquez, Christo		
		Enriquez Christoba	d .	

Signature of Debtor

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ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT , MI 48243 USA

CALIFORNIA REPUBLIC BK 18400 Von Karman Ave Irvine , CA 92612 USA

ESCALLATE LLC 1606 E TURKEYFOOT LAKE R AKRON , OH 44312 USA

ESCALLATE LLC 1606 E TURKEYFOOT LAKE R AKRON, OH 44312 USA

TD BANK USA/TARGETCRED PO BOX 673 MINNEAPOLIS , MN 55440 USA

TARGET/TD 1000 Nicollet Mall Minneapolis , MN 55403 USA

ILLINOIS COLLECTION SE 8231 185TH ST STE 100 TINLEY PARK , IL 60487 USA

ILLINOIS COLLECTION SE 8231 185TH ST STE 100 TINLEY PARK , IL 60487 USA

COMENITY BANK/NWYRK&CO 220 W SCHROCK RD WESTERVILLE , OH 43081 USA

CB/NY&CO P.O. Box 659728 San Antonio , TX 78265

Associate Pathologists of Joliet 333 Madison St. Joliet , IL 60435 USA

Joliet Radiology, S.C. 36910 Treasury Center Chicago , IL 60694 USA Case 16-15452 Doc 1 Filed 05/05/16 Entered 05/05/16 17:16:43 Desc Main Document Page 63 of 72

City of Joliet PO Box 457 Wheeling , IL 60090 USA

Joliet Radiology, S.C. 36910 Treasury Center Chicago , IL 60694 USA

Presence Saint Joseph Medical Center 333 Madison St Joliet , IL 60435 LISA

Presence Saint Joseph Medical Center 333 Madison St Joliet , IL 60435 USA

EMP of Will county PO BOX 14000 Belfast , ME 04915 USA

DirecTV P.O. Box 6550 Greenwood Village , CO 80155 USA

Presence Saint Joseph Medical Center 333 Madison St Joliet , IL 60435 USA

Presence Saint Joseph Medical Center 333 Madison St Joliet , IL 60435 USA

Document Page 64 of 72 Part 6: Answer These Questions for Reporting Purposes 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are Do you estimate that paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **1**-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 ✓ \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$1,000,000,001-\$10 billion \$50,001-\$100,000 \$10,000,001-\$50 million estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion **✓** \$0-\$50,000 \$500,000,001-\$1 billion \$1,000,001-\$10 million 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 134101519 and 3571. X /s/ Christobal Enrique: Signature of Debtor 2 Signature of Debtor 1 Executed on _ 5/5/2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Doc 1

Debtor 1	Christopate 16	5-15452	Doc 1	Filed 05/05/146z	Entered 05/05/11:0:17:11:0:43	Desc Main
	First Name		Middle Name	Document Name	Page 65 of 72	
				Doddinent	age of or 12	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

N 8		a case in which § 707(b)(4)(D) applies, certify on in the schedules filed with the petition is
/s/ Brent Ingram Signature of Attorney for Debtor	Date	5/5/2016 MM / DD / YYYY
Brent Ingram		
Printed name		
Semrad Law Firm		
Firm name		
2424 Plainfield Road		
Street		
Suite 300		
Crest Hill	Illinois	60403
City	State	Zip Code
Contact phone	×/	Email address
Bar number		State

MILE OF COMMENT OF THE PERSON	Case 16-15452 ation to identify your cas	Doc 1 Filed Doc		ntered 05/05/16 1 ue 66 of 72	17:16:43	Desc Main	
Debtor 1	Christobal		Enriquez				
	First Name	Middle Name	Last Nam	ne			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Nam	ne l			
United States Ba	ankruptcy Court for the:	Northern	District of Illino	pis			
Case number (If known)	•		(Star	(e)			
Official F	orm 106De	C					Check if this is a amended filing
Declarat	ion About a	n Individual I	Debtor's S	chedules			12/1
f two married pe	eople are filing togethe	r, both are equally resp	onsible for supplyin	g correct information.			
oroperty by frau 519, and 3571. Part 1: Sign		bankruptcy case can res	sult in fines up to \$2	50,000, or imprisonment	for up to 20 ye	ars, or both. 18 U.S.0). §§ 152, 1341,
Did you pa	y or agree to pay some	one who is NOT an atto	rney to help you fill	out bankruptcy forms?			
✓ No							
Yes. N	ame of person			ankruptcy Petition Prepare e (Official Form 119).	r's Notice, Decla	aration, and	
that they a	re true and correct o	e that I have read the sur		es filed with this declarat	ion and		
Signature of	bal Enriquez Debtor 1	A CHAR	Jul *	Signature of Debtor 2		· · · · · · · · · · · · · · · · · · ·	= :
Date <u>5/5/20</u> MM/E	DD/YYYY	V		Date MM/DD/YYYY			

Debtor 1 Christopase 16-15452 Doc 1 File First Name Do	ed 05/05/196 Entered ocument Page 67	L05/05/16∘17/16:43 Desc Main of 72
 Within 2 years before you filed for bankruptcy, did yo creditors, or other parties. 	u give a financial statement to	anyone about your business? Include all financial institutions,
No Yes. Fill in the details below.		
_	Date issued	
Name	MM/DD/YYYY	
Number Street		
City State Zip Code		
Part 12: Sign Below		
I have read the answers on this <i>Statement of Financia</i> and correct. I understand that making a false statement bankruptcy case can result in fines up to \$250,000, or in	nt, concealing property, or obta	
/s/ Christobal Enriquez Signature of Debtor 1	Conful 3	Signature of Debtor 2
Date 5/5/2016		Date
Did you attach additional pages to Your Statement of	Financial Affairs for Individuals	s Filing for Bankruptcy (Official Form 107)?
✓ No ☐ Yes		
Did you pay or agree to pay someone who is not an att	orney to help you fill out bankr	uptcy forms?
☑ No		
Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor	Christopa 16-15452	Doc 1 Filed 05/05/16	Entered 05/05/16,17,16:43 age 68 of 7,2000 Entered 17,1000	Desc Main
1	First Name	Middle Name Last Name	age 68 or 72 -	
	ist Your Unexpired Per			
informat	on below. Do not list real esta	ease that you listed in Schedule G: Exec te leases. Unexpired leases are leases the trustee does not assume it. 11 U.S.C.	hat are still in effect; the lease period ha	
Desc	cribe your unexpired personal	property leases	Will the	e lease be assumed?
Less	or's name:		☐ No ☐ Yes	
Desc	ription of leased erty:			
Less	or's name:		No Yes	
Desc	ription of leased erty:			
Less	or's name:		☐ No ☐ Yes	
Desc	ription of leased erty:			
	or's name:		☐ No ☐ Yes	
Desc	ription of leased erty:			
Lesso	or's name:		☐ No ☐ Yes	
Desc prope	ription of leased rrty:			
Lesso	or's name:		No Yes	
Desc	ription of leased rty:			
Lesso	or's name:		☐ No ☐ Yes	
Desc prope	ription of leased rty:			
	ign Below			
Under that is	penalty of perjury, I declare the subject to an unexpired least	nat I have indicated my intention about a	iny property of my estate that secures a	debt and any personal property
	Christobal Enriquez	WAMAN	Signature of Debtor 1	
Dat	e 5/5/2016 MM/DD/YYYY		Date MM/DD/YYYY	

	5/05/146 Entered	<u>0</u> 5/05/166-17/-166:4	4 <u>3 Desc Main</u>	
First Name Middle Name Docu	ment Page 69	Of 72 Column A Debtor 1	Column B Debtor 2 or	
8. Unemployment compensation Do not enter the amount if you contend that the amount received we	as a benefit under the	\$0.00	non-filing spouse	
Social Security Act. Instead, list it here: For you \$0	.00			
	.00			
Pension or retirement income. Do not include any amount receive benefit under the Social Security Act.	ved that was a	\$0.00	1	
10.Income from all other sources not listed above. Specify the s Do not include any benefits received under the Social Security Act received as a victim of a war crime, a crime against humanity, or ir domestic terrorism. If necessary, list other sources on a separate total below.	or payments nternational or			
		//		
Total amounts from separate pages, if any.		+\$0.00		
11. Calculate your total current monthly income. Add lines 2 threcolumn. Then add the total for Column A to the total for Column	ough 10 for each B.	\$ <u>2,348.23</u> +		= <u>\$2,348.23</u>
				Total current monthly income
Part 2: Determine Whether the Means Test Applies t	o You			monany moonie
12. Calculate your current monthly income for the year. Follow the				
12a. Copy your total current monthly income from line 11.		Copy lii	ne 11 here →	\$2,348.23
Multiply by 12 (the number of months in a year).				X 12
12b. The result is your annual income for this part of the form.			12b.	\$28,178.76
			'	
13 Calculate the median family income that applies to you. Follo	200 March 1997			
Fill in the state in which you live.	Illinois			
Fill in the number of people in your household.	1			
Fill in the median family income for your state and size of househo	ld.		13.	\$49,741.00
To find a list of applicable median income amounts, go online usin instructions for this form. This list may also be available at the bank 14. How do the lines compare?	g the link specified in the separate of the se	arate		
TO SECOND CONTROL CONTROL OF CONTROL CONTROL CONTROL OF CONTROL CONTRO	ro 1 shock boy 1 Thoro is no	a programation of abuse		
14a. Line 12b is less than or equal to line 13. On the top of page Go to Part 3.	ge 1, check box 1, There is no	presumption of abuse.		
14b. Line 12b is more than line 13. On the top of page 1, check Go to Part 3 and fill out Form 122A-2.	box 2, The presumption of a	buse is determined by Form	122A-2.	
Part 3: Sign Below				
By signing here, I declare under penalty of perjury that the information	ation on this statement and in	any attachments is true and	correct.	
/s/ Christobal Enriquez Signature of Debtor 1	AM III X Signatur	re of Debtor 2		
Signature of Debtor 1	Signatu	ile of Debtor 2		
Date 5/5/2016 MM/DD/YYYY	Date 5	6/5/2016 MM/DD/YYYY		
If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this	form.			

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Northern District of Illinois

Enriquez, Christobal

Debtor(s)

Chapter.

Chapter7

VERIFICATION OF CREDITOR MATRIX

The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 5/5/2016

/s/ Enriquez, Christobal/

Enriquez, Christobal Signature of Debtor

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1400 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Cristob	al Enriqu	ez
Matter	Number	474569-00

nitial		
	 _	_

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 05/05/2016	
Client MMM T	Client
Attorney /	